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APPLICANTS

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*Hrs 3/19/06*

\*\* CONTINUING DATA \*\*\*\*\*

*Hrs 3/19/06*

\*\* FOREIGN APPLICATIONS \*\*\*\*\*

IF REQUIRED, FOREIGN FILING LICENSE GRANTED  
 \*\* 10/27/2003

Foreign Priority claimed <input type="checkbox"/> yes <input checked="" type="checkbox"/> no	STATE OR COUNTRY NC	SHEETS DRAWING 2	TOTAL CLAIMS 8	INDEPENDENT CLAIMS 2
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35 USC 119 (a-d) conditions met  
☐ yes ☐ no ☐ Met after Allowance

Verified and Acknowledged  
 Examiner's Signature *[Signature]* Initials

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TITLE  
 Disk fragmentation test system

FILING FEE  RECEIVED 750	FEES: Authority has been given in Paper No. _____ to charge/credit DEPOSIT ACCOUNT No. _____ for following:	<input type="checkbox"/> All Fees <input type="checkbox"/> 1.16 Fees ( Filing ) <input type="checkbox"/> 1.17 Fees ( Processing Ext. of time ) <input type="checkbox"/> 1.18 Fees ( Issue ) <input type="checkbox"/> Other _____
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